



For help completing this form, call Accounts Payable (801) 538-3110 or (801) 538-3112

## Vendor Number Application/Update (Substitute W-9 Certification)

### Ownership Type that Applies to You or Your Business (Select one and supply a SSN or EIN as applicable)

**Individual**

**SSN**

**Sole Proprietorship**

(Includes one-member Limited Liability Companies)

**SSN**

**EIN**

**Partnership**

(Includes Limited Liability Companies with two or more member)

**EIN**

**Corporation**

(Professional Corporation, S-Corp, etc.)

**EIN**

**Governmental Entity**

**EIN**

**Nonprofit Corporation**

**EIN**

**Trust**

**EIN**

**Other**

(Be specific)

**EIN**

### Type of Business (Select Yes or No as applicable)

Does your business provide Medical Services?      **Yes**      **No**

Does your business provide Legal Services?      **Yes**      **No**

### Name

**Name as reported to IRS** (for individuals & sole proprietors this should be the name of the individual)

**Business Name, Trade Name or DBA** (if different then above)

### Address for Payments

**Street Address**

**City**

**State**

**Zip Code**

**NOTE:** If you prefer to receive payments as Electronic Funds Transfers (EFT) to your bank account, complete an FI 16V - Direct Deposit Authorization for Electronic Funds Transfers (EFT) for Vendors. This form is available at <http://efinance.state.ut.us/evendor>.

### Certification

IRS regulations state that if you fail to provide the correct *Social Security Number* or *Employer Identification Number* requested above, you may be subject to a penalty. If you willfully provide false information you may be subject to criminal penalties including fines and/or imprisonment.

**I, the undersigned certify that I am authorized to provide the above information and the information is true and correct.**

\_\_\_\_\_  
**Authorized Signature**

**Printed Name**

**Title**

**Date**

**Email Address**

**Telephone Number**

**Fax Number**

### Return to:

Accounts Payable  
Division of Finance  
2110 State Office Building  
Salt Lake City, UT 84114

OR      **Fax to (801) 538-3562**